

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>07/15/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>100574</i>	<i>10-5-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/15/00
2			
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5	✓	✓	10/15/00
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9	✓	✓	10/15/00
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31	✓	✓	10/15/00
32	✓	✓	10/15/00
33	✓	✓	10/15/00
34	✓	✓	10/15/00
35	✓	✓	10/15/00
36	✓	✓	10/15/00
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50	✓	✓	10/15/00

Claim	Final	Original	Date
51	✓	✓	10/15/00
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57	✓	✓	10/15/00
58			
59			
60			
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62	✓	✓	10/15/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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